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FORM D PROCESSED

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

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SEC USE ONLY

DATE RECÉIVED

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FEB 0 5 2007

THOMSON FINANCIAL

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

UNIFORM LIMITED OFFERING EXEMITION	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	_
Name of Offering (check if this is an amendment and name has changed, and indicate change.) MissionPoint Capital Partners Fund I, L.P Limited Partner Interests	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) UND JAN 26 2007	_
A. BASIC IDENTIFICATION DATA	_
1. Enter the information requested about the issuer	_
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
VissionPoint Capital Partners Fund I, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)	_
c/o MissionPoint Capital Partners LLC, 20 Marshall Street, Suite 300, South Norwark, CT 06854 203-286-0400	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)	
Brief Description of Business	_
Investment Fund	
Type of Business Organization corporation business trust limited partnership, already formed other (please specify): limited partnership, to be formed	-
Month Year Actual or Estimated Date of Incorporation or Organization: 0 7 0 6 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	_

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9



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2. Enter the information re	quested for the fol	lowing:			
 Each promoter of (the issuer, if the is:	uer has been organized w	ithin the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more o	f a class of equity securities of the issuer
 Each executive off 	icer and director o	f corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
		f partnership issuers.		5 0.	
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	☐ Director	General and/or
					Managing Partner
Full Name (Last name first,	f individual)				
Fink, Jesse					
Business or Residence Addre c/o MissionPoint Capital				CT 06854	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)		 		***************************************
Schwartz, Mark					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
c/o MissionPoint Capital F				CT 06854	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Cirilli, Mark	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	• •	
c/o MissionPoint Capital I	Partners LLC, 20	Marshall Street, Suite	300, South Norwark,	CT 06854	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
MissionPoint Capital Part	ners LLC				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
20 Marshall Street, Suite	300, South Nor	wark, CT 06854			
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i MPCP I GP, LLC	f individual)				
Business or Residence Addre c/o MissionPoint Capital				CT 06854	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
·	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary)

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1.	Has the	issuer solo	i, or does ti	ne issuer i	ntend to se	ll. to non-a	ccredited i	nvestors in	this offer	ing?		Yes	No [∕]
			,			Appendix				_	***************************************	L.J	「「
2.	What is	the minim	um investn					_				s \$ 5,	*000,000
	*The	General P	artner, MP	CP I GP, L	LC reserv	es the righ	t to accept	capital co	mmitments	of a lesse	r amount	Yes	No
3.			permit join									✓	
4.	commis If a pers or states	sion or sim on to be lis s, list the na	ilar remune ted is an ass	ration for s sociated pe roker or de	solicitation erson or age caler. If me	of purchas int of a brok ire than fiv	ers in conne ker or deale e (5) persoi	ection with r registered ns to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state ons of such		
Ful	Name (Last name	first, if ind	vidual)									
Bus	siness or	Residence	Address (N	umber and	d Street, C	ity, State, 2	Zip Code)						· · · · · · · · · · · · · · · · · · ·
Nar	ne of Ass	sociated Br	oker or De	aler			· · · · · · · · · · · · · · · · · · ·						
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)		***************************************	**************		·····	••••••	☐ Al	l States
	AL IL MT RI	IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (I	Last name	first, if indi	vidual)	•					• • •			
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)					····	
Nar	ne of Ass	sociated Br	oker or De	aler									
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		*************	······································	····			☐ Al	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (l	Last name	first, if indi	vidual)								· · ·	
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)						
Nar	ne of Ass	sociated Br	oker or De	aler									
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						<u>.</u>
	(Check	"All States	or check	individual	States)			.,.,,.,	•••••	•••••	**************	□ All	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold s 0.00 Equity ________ \$ 0.00 0.00 Common Preferred 0.00)\$ Other (Specify _ \$ 335,500,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases \$ 335,500,000.00 Accredited Investors 91 Non-accredited Investors 0 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 \$ 0.00 Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 0.00 Transfer Agent's Fees \$ 20,000.00 Printing and Engraving Costs 145,000.00 Legal Fees 0.00 Accounting Fees 0.00 Engineering Fees \$ 0.00 Sales Commissions (specify finders' fees separately)..... 0.00

Total

165,000.00

	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	-Question 4.a. This difference is the "adju	sted gross	335,335,000.00			
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to P	any purpose is not known, furnish an esti of the payments listed must equal the adjus	mate and				
			Payments to Officers, Directors, & Affiliates	Payments to Others			
	Salaries and fees			2 \$ 0.00			
	Purchase of real estate		v \$_0.00	☑ \$ <u>0</u>			
	Purchase, rental or leasing and installation of m and equipment	achinery		S 0.00			
	Construction or leasing of plant buildings and f	acilities	<u>V</u> \$ <u>0.00</u>	√ \$_0.00			
	Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)	ssets or securities of another		. ☑ \$_0.00			
	Repayment of indebtedness		_	▽ \$_0.00			
	Working capital			\$ 0.00			
			S _0.00	\$ 335,335,000.0			
	Investment of proceeds.		\$_0.00	V 2 0			
	Column Totals			5 335,335,000.0			
	Total Payments Listed (column totals added)	<u> </u>	335,335,000.00				
		D. FEDERAL SIGNATURE	A STATE OF THE STA	11.4 J. F. S.			
sign	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to finformation furnished by the issuer to any non-ac	he undersigned duly authorized person. If t urnish to the U.S. Securities and Exchange	his notice is filed under Ru Commission, upon writte	tle 505, the following on request of its staff,			
ssu	er (Print or Type)	Signature	Date				
Mis	sionPoint Capital Partners Fund I, L.P.		January 25, 200	7			
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)					
Jesse Fink Managing Director of the Managing Member of the General Par							

- ATTENTION -